

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO

Complete if Known

(use as many sheets as necessary)


Sheet	1	of	3
-------	---	----	---

Application Number	09/759,595
Filing Date	January 11, 2001
First Named Inventor	Wesche, Holger
Group Art Unit	1646
Examiner Name	Unassigned
Attorney Docket Number	18781-003910

U.S. PATENT DOCUMENTS

[illegible]

FOREIGN PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Office ³	Number ⁴	Kind Code ⁵ (if known)				
	1	PCT	WO 00/20587					<input type="checkbox"/>
	2	PCT	WO 98/44113					<input type="checkbox"/>
	3	PCT	WO 99/27112					<input type="checkbox"/>
	4	PCT	WO 99/60100					<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>

Examiner
Signature

Date
Considered

26-5

¹ Unique citation designation number. ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231

Please type a plus sign (+) inside this box →

PTO/SB/08B (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

2

of

3

Complete if Known

Application Number	09/759,595
Filing Date	January 11, 2001
First Named Inventor	Wesche, Holger
Group Art Unit	1646
Examiner Name	Unassigned
Attorney Docket Number	18781-003910

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
<i>[Signature]</i>	5	Baeuerle, et al., <i>Ann. Rev. Immunol.</i> , 12:141-179 (1994)	<input type="checkbox"/>
<i>[Signature]</i>	6	Cao, et al., <i>Nature</i> , 383:443-446 (1996)	<input type="checkbox"/>
<i>[Signature]</i>	7	Cao, et al., <i>Science</i> , 271:1128-1131 (1996)	<input type="checkbox"/>
<i>[Signature]</i>	8	Dinareello, <i>Cytokine & Growth Factor Rev.</i> , 8(4):253-265 (1997)	<input type="checkbox"/>
<i>[Signature]</i>	9	Feinstein, et al., <i>TIBS</i> , 20:342-344 (1995)	<input type="checkbox"/>
<i>[Signature]</i>	10	Greenfeder, et al., <i>J. Biol. Chem.</i> , 270(23):13757-13765 (1995)	<input type="checkbox"/>
<i>[Signature]</i>	11	Grilli, et al., <i>Int. Rev. Cytol.</i> , 143:1-62 (1993)	<input type="checkbox"/>
<i>[Signature]</i>	12	Kanakaraj, et al., <i>J. Exp. Med.</i> , 18(12):2073-2079 (1998)	<input type="checkbox"/>
<i>[Signature]</i>	13	Kanakaraj, et al., <i>J. Exp. Med.</i> , 189(7):1129-1138 (1999)	<input type="checkbox"/>
<i>[Signature]</i>	14	Lee, et al., <i>J. Clin. Pharmacol.</i> , 38:981-993 (1998)	<input type="checkbox"/>
<i>[Signature]</i>	15	Lenardo, et al., <i>Cell</i> , 58:227-229 (1989)	<input type="checkbox"/>
<i>[Signature]</i>	16	Misteli, et al., <i>Nature Biotechnology</i> , 15:961-964 (1997)	<input type="checkbox"/>
<i>[Signature]</i>	17	Muzio, et al., <i>Science</i> , 278:1612-1615 (1997)	<input type="checkbox"/>
<i>[Signature]</i>	18	Scanlan, et al., <i>Int. J. Cancer</i> , 83:456-464 (1999)	<input type="checkbox"/>
<i>[Signature]</i>	19	Scanlan, et al., Accession number AF=155118, XP-002168129, January 5, 2000	<input type="checkbox"/>

Examiner Signature

Date Considered

2-6-03

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

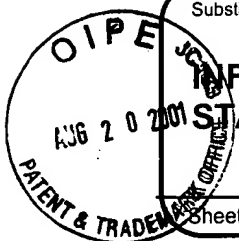
Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

SF 1241795 v1

RECEIVED

CH CENTER 1600/2900

AUG 2 2001



Please type a plus sign (+) inside this box

+

PTO/SB/08B (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449B/PTO

Complete if Known

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

3

of

3

Application Number

09/759,595

Filing Date

January 11, 2001

First Named Inventor

Wesche, Holger

Group Art Unit

1646

Examiner Name

Unassigned

Attorney Docket Number

18781-003910

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
<i>[Signature]</i>	20	Schindler, et al., <i>Mol. Cell Biol.</i> , 14(9):5820-5831 (1994)	<input type="checkbox"/>
<i>[Signature]</i>	21	Thomas, et al., <i>J. Immunol.</i> , 163:978-984 (1999)	<input type="checkbox"/>
<i>[Signature]</i>	22	Wesche, et al., <i>Immunity</i> , 7:837-847 (1997)	<input type="checkbox"/>
<i>[Signature]</i>	23	Wesche, et al., <i>J. Biol. Chem.</i> , 274:19403-19410 (1999)	<input type="checkbox"/>
<i>[Signature]</i>	24	Yang, et al., <i>J. Immunol.</i> , 163:639-643 (1999)	<input type="checkbox"/>
<i>[Signature]</i>	25	Yeh, et al., <i>Immunity</i> , 7:715-725 (1997)	<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Examiner
Signature

Date
Considered

2-6-02

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

SF 1241795 v1

RECEIVED